West County Health Centers
Caring for our Communities

WCHC NURSE ORIENTATION CHECKLIST

Name: _____   Date and initial when completed by roles indicated.

Note * indicates attached documentation or procedure

		Operating Principles * Jason/RN manager
Initial	**Date**	
		Relationship focused
		Access
		Team based care
		Comprehensive care
		Care must be adaptable and measurable
		Cost effective

		Human Resources/Basic Agency Orientation Phyllis
Initial	**Date**	
		WCHC Mission and Vision
		Agency overview - Org Chart
		Agency services (Sites, MH/BH, dental, TC, Graton, Specialty care)
		HR Sign up Paperwork
		Badge
		Credentialing Process
		Agency Orientation - Job Description
		Employee Handbook
		Community Programs Overview
		HIPPA/Film
		Universal Precautions/Film
		ECW/WCHC logins and Outlook Group Assignmer (RCHC)
		Security on computers

		Office Orientation Office Manager
Initial	**Date**	
		Meeting the staff (get to know their names and at least one thing interesting about them)
		Workstation orientation – get to know your workstation; consider preferences/needs for chair, pens,
		office supplies, letterhead, prescription pads, batteries.
		Ergonomic assessment
		Ergonomic assessment completed
		Modifications made if needed
		Room orientation – tour of rooms, supplies, resource guide, patient hand- outs
		Break room – expectations about cleaning dishes, etc
		Opening/closing the clinic - Alarm system/lights, door
		Orientation to facility: where (clinical and office) supplies, equipment, files, medications are
		stored (create scavenger hunt list, or find all items on clinical supply order sheet)
		Lab orientation
		Medical Equipment orientation / demonstration
		Emergency equipment, oxygen, AED
		Location and use of office equipment: location of copy machine, fax, to be scanned file, stamps
		Use of phone system, intra-agency numbers, other numbers (area hospitals, other providers, etc)
		Opening and closing tasks
		Disposal of infectious waste, meds, etc

IT / Computer Hardware		

Initial	Date	
		Computer orientation – log in, citrix, intranet, docshare, Krames,
		How to access IT support
		Phones and Virtual Extention Set-up
		How to use phone and voice mail
		Internet Policy Review
		Website/Intranet Orientation
		Log- in eCW/WCHC
		Docshare and available folders
		eCW Settings/profile/default printers
		Security on computers
		Microsoft/Outlook
		Demonstrate ability to send/receive e-mail
		Demonstrate ability to use calendar inc meeting, move a meeting, ask for a new time, delete, invite guests
		Demonstrate ability to add a personal signature and confidentiality disclaimer to e-mails
		How to use MS word for word processing
		Demonstrate the ability to use MS excel to create basic worksheet, create basic graph
		Making screen shots (using snip-it and paint programs)
		Printers/C2 Rx
		Locking up tablets
		Protocol for logging off desktop computer (log off only)/tablet (shut down completely)
		Tablet orientation
		Turning on – Log in
		Calibrating the pen
		Tips on using the pen effectively
		Handwriting recognition function – demonstrate ability to write a paragraph using the pen
		MODI – demonstrate ability to ink a document, save, fax using pen
		Using Video conferencing equipment, HIPAA considerations, using microphone/speakers/headphones, verbal consent, GT modifier
		WebEx Connect - sign-on, profile, productivity tools, Intstant Messaging, Video Call, desktop sharing,
		WebEx - sign-on, starting a meeting,navigating video, audio conference, recording, whiteboard, inviting others
		iPad - general navigation, Webex (sign-on, starting a meeting, inviting others, audio)
		Mobile wifi - turning on, chargin, speed testing, linking to device

Billing and Patient programs		Vikki	

Initial	Date	
		Training set up with Lydia and Vikki
		Demonstrates understanding of eligiblility and billing implications for Sliding scale/
		Medi-Cal/CMPS/FPACT/Healthy Families/CDP/CHDP/CCS
		CDP tracking workflow and implications demonstrated
		Demonstrates understanding of the 340B program
		Demonstrates understading of the "Uninsured lab program"
		Demonstrates understanding of the Sliding scale lab contract with Quest
		Understands Rx Patient Assistance programs and workflows
		Demonstrates understaniding of VFC, immunization programs
		Understands Managed MediCal through Partnership
		Understands Medicare lab restrictions
		Sutter Lab/DI/Hospitalization restrictions
		Understands eligiblity and process for referral to Operation Access

eCW Training*		

Initial	Date	
		Initial basic training at WCHC
		Recorded eCW Webinar 1 (2+3 optional)
		eCW live webinar EMR I and II
		RCHC EMR basic
		WCHC provider eCW skill checklist (4hr)
		RN specific eCW skills
		Understanding Jelly Beans: Telephone encounters, Labs/DI, Documents, Messages
		eCliniforms: How/ when to use, uploading forms to eCliniforms
		Specialty Forms: How/when to use, modifying existing specialty forms

		Referrals: making referrals, viewing referrals in progress or completed, updating status of referrals
		Deceased patient workflow
		by adding notes, assigning referrals
		Patient portal
		Introduction video (15min) http://vimeo.com/eclinicalworks/review/38366273/e46291ca65
		Portal training documents: General portal overview; Responding and creating web encounters; Publishing Lab/DI results;
		CTMA importing portal info into PN; FO Triaging Pt Portal Communication; FO Updating Demographics

Care Team orientation	RN manager	
Initial	**Date**	
		Care team role overview *
		RN Case Manager Role Overview*
		Set up budget for dedicated time in the week to include: triage, care management support,
		case management, RN education, nurse visits
		Provider task distribution*
		Document distribution*
		Medication refill protocols*
		Nurse visits*
		Care team monthly meetings
		Daily RN check-in
		Transfer of trust – warm hand-off

MA Role Orientation	Dana/Lead MA	
Initial	**Date**	
		Shadow the lead MA for a day to learn the flow for rooming patients, taking vitals, charting,
		discharging patients, locations of supplies, how labs are drawn, sent to quest, etc
		Learn most of the procedures performed by MAs that an RN may need to perform
		See the list of MA "housekeeping" type chores (e.g.: checking fridge and freezer temps, changing autoclave water)
		Understand quality assurance checks for CLIA standards
		Demonstrates understanding of CAIR entry and data retrieval
		Understand CTMA care team responsibilities: communicating with provider, population management, etc

FO Role Orientation	Office Manager	
Initial	**Date**	
		How to schedule appointments, understand the providers' schedules, re-classify visit status (confirmed,
		pending, ready, etc), understand the color coding of the schedule
		FO Triage guidelines
		Where labs/ prescriptions / other paperwork is kept at FO for pt pick up.
		Changing status of patient's appointment, working in office visit screen and resource visit screen
		Looking up patients
		Navigating through patient hub
		Review scheduling MH/BH/Psych
		Review Provider Panel Report

General	RN Manager	
Initial	**Date**	
		Staff meetings - time and location of department, site all staff, and agenc all staff meetings
		We hope to meet the clinical needs of our patients in the clinic to avoid their need to seek care
		at the urgent care or emergency room.
		Productivity – our budget depends on providers seeing at least 2.4 pts per hour average.
		New patients are scheduled for 30 minute visits; follow up appointments are 20 minutes (many
		new patients will need 2-3 visits to complete a new patient visit). Go over visit length protocol
		All staff, but particularly Providers and RN staff should take responsibility to ensure structured data
		within eCW is updated and accurate.
		A provider/Care team can determine that certain patients with particular needs or complexity can be scheduled
		for routine 30-minute visits
		All orders should be made through eCW – safety and clarity will depend on this
		Coverage for needed patient care items while provider is out of the clinic or on vacation discussed.

Initial	Date	
		Review of patient complaints/suggestions
		Support/process for reporting and managing medical errors/potential malpractice or high-risk clinical needs
		Patient Surveys - review process and results
		Basic understanding of Cognos and BridgeIT reporting
		Review Quality Outcome reports
		Patient discharge policy
		Progress note completion – expectation is to have notes completed and ready for billing and locked within 1 week of visit. Charts are delinquent after 1 month
		Managing prior auth/refills for psychiatric providers – primary care providers are responsible for managing refills and prior auths forpsychiatry staff to ensure timely completion of these items.

Call/admissions   RN manager

Initial	Date	
		Night call – 4:30pm – 6:30am
		Morning admissions from 6:30-11:30 are assigned to the rounding provider
		Admissions from 11:30-4:30 – Patient's clinic home will arrange for admission and reschedule patients if needed
		Patients who require direct admission from the clinic should have the admission orders completed, H&P dictated or written and faxed, RN manager/group training
		Answering service overview, number
		Inpatiet discharge policy – RN case management (Review attached Nurse Case Management protocol)

Module I : Care Management Support

Initial	Date	
		Medication Management
		Rx history and Current Medications functions-using to answer med questions from patients
		Using Epocrates to look up medication information
		Refilling medications from telephone encounters per RN medication refills protocol: faxing and e-prescribing medication prescriptions
		Changing Rx to therapeutic substitutions of formulary-covered medications
		Submitting TARs and PAs
		Adding notes to prescriptions
		Viewing FAX outbox (To see if RX sent or FAX failed, etc.)
		Using eScript logs for information (to see if RX has been sent)
		Adding or changing default pharmacy in information screen
		Viewing, adding, changing allergies (including meds tried and failed, adverse rxns, sub therapeutic meds)
		Update current medications on patient's profile
		Investigating and trouble-shooting problems
		Coumadin Tracking Protocol
		Labs/Diagnostic Test Results Management
		Looking up labs/DI results
		Ordering labs and DIs in virtual visit
		Reviewing outstanding and unreviewed labs
		Transmitting Labs
		Submitting standing orders
		Daily triage of abnormal lab results
		Daily reviewing and delegating workflow for normal lab results for care team providers
		Understanding what DI orders need a prior auth
		Understanding flow of lab orders and results not from quest
		Understanding lab fees for uninsured patients
		Documents Management
		Understanding correct agency flow for various kinds of documents (review document distribution document)
		Understanding how to look up and find documents
		Understanding how to manage documents in eCW:
		Assigning documents to patients
		Reviewing documents
		Inking documents
		Faxing documents from documents screen
		Making notes on documents,
		Attaching lab/DI documents to orders
		Updating new clinical information from documents into patients structured data fields from doc window.
		Troubleshooting misplaced, mis-categorized, mis-attached documents

Initial	Date	
		Clinical Aspects of Care Management Support (MA role to satisfy logistical)
		Prior Authorization
		Disability forms
		Durable Medical Equipment
		Home Health communication
		IHSS
		Records release
		Sports/school physicals
		Advice Nurse / RN Triage
		General understanding of appropriate types of calls/concerns
		Advice nursing clinical resources
		Focused conversation/inter RN manager/group training
		Go over WCHC triage protocol for front office.
		Review resources for RN triage

Module II : Population Management

Initial	Date	
		Understanding Population Management - nurse's role
		Ongoing Clinical Guidelines for population management of health maintenance and chronic conditions
		Using the Registry and recall functions in eCW
		Using Cognos to query population management criteria
		Abnormal results recall
		Creating patient specific alerts
		Normal PAPs and Mammograms
		Checking that alerts are satisfied
		Sending Normal Letters with Tracking (or delegating this to CTMA)
		Abnormal PAPs and Mammograms: Entering into Patient Specific Alerts
		Documentation of follow-up: sending normal and customized letter
		Saving customized letters to Patie RN manager/group training
		Ordering Diagnostic Imaging as needed
		Tickler Follow up: Using Actions as reminders for future pt actions

Module III : Skills Expansion

Initial	Date	
		RN Patient Interviewing / Communication:
		Focused patient interview
		Motivational interviewing
		Goal setting,
		Needs assessment,
		Culture review,
		Establishing boundaries,
		Initiating discharge at the time of intake RN manager/group training
		Customer Service
		Time Management Skills

Module IV: Case Management, Nurse Visits, Patient Education

Initial	Date	
		Disease Case Management
		Understanding what RN Disease Case Management Is: differentiating nurse case management from social work/BH
		Familiarization with community resources for case management, using and updating intranet list of community resources
		Chronic diseases and other conditions that justify case management
		Referrals process
		Initial assessment / Intake
		Creating a patient specific "Care Plan" and review with care team
		Ongoing case management contact with patients
		Coordinating within-agency care: behavioral health, access coordinator, medical care, specialty referrals, etc
		Coordinating out-side agency resources: community resources, outside specialists
		Charting on and tracking progress of patients being case managed
		Documenting "Active Case Management" list
		Maintaining a manageable caseload
		Using, creating and modifying templates in eCW
		Case management meetings: between case managers, between clinicians involved in a particular case

		Evaluating effectiveness of case management activities
		Hospital Nurse Case Management
		Review of RN Protocol Binder
		Health system adv Administration of tool, scoring, coaching Modules 1-4, user name and password for PAM scoring
		Complex Care Management Password and username, Administering, soring results, recording in eCW
		Concept of CCM, high cost outliers, Atul Guwande - Hot Spotter article,
		Guided Care Training
		PAM Training
		SF12/36 evaluation
		PHQ9 - training
		CCM intake and follow up
		CCM Case Conference
		Hospital Transition
		Coleman Model - Four Pillars
		Sutter, SRMH, PDH census protocol
		Hospital Transition Intake
		Hospital Transition follow up calls
		Nursing visits
		Understanding appropriate chief complaints
		Assessing patient for nurse-visit appropriate chief complaints:
		Pharyngitis
		UTI
		Pregnancy testing
		Emergency Contraception
		STI testing and treatment
		Wound Care
		Documenting Nursing visits using templates
		Coordinating Medical Provider oversight and short patient evaluation
		Appropriate scheduling of nurse visits to maximize efficiency of office space and provider time
		Coding for the visit
		Health Education Visits
		General health education knowledge requirements to be satisfied in the first 6 months or
		documentation of prior experience or expertise:
		Diabetes,
		Asthma/COPD,
		Hypertension,
		Ischemic Heart Disease,
		Hyperlipidemia,
		Smoking cessation,
		Pre-natal,
		Newborn/post-partum,
		Basic lactation,
		Hepatitis C,
		HIV
		More...
		Advanced Nurse Education for those with certification or advanced training:
		Certified Diabetic Educator,
		Lactation consultation/Lactation Educator,
		HIV case manager,
		OB Case Manager,
		Hep C Case manager,
		Hospital case Manager
		Certified Asthma Educator
		Documentation for one on one and group education visits using templates
		Group Medical Visits as an opportunity for patient engagement
		Krames On-Demand and Krames Online patient education software
		Identifying patients in need of health education visits
		Scheduling health education visits to maximize efficient use of clinic space and provider time